POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	*UM*	MJJM	11/10
O.I.P.E. CLASSIFIER	*DN*	32	11/15
FORMALITY REVIEW		7/471	11/26

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
−	(Through numeral) Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Board Decision

Claim Final	Original	4/10/02	1/3/03	4/26/05								Date			
1	①	✔	✔	=											
2	2	✔	✔	=											
3	3	0	0	=											
4	④	✔	✔	=											
5	5	0	∅	=											
6	6	✔	✔	=											
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If more than 150 claims or 10 actions
staple additional sheet here

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